

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS
FAIR POLITICAL PRACTICES COMMISSION
COVER PAGE

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NAME OF FILER

(LAST)

(FIRST)

BY: B. J. H. (MIDDLE)

Nielsen

James

W.

1. Office, Agency, or Court

Agency Name

CA State Assembly

Division, Board, Department, District, if applicable

District 2

Your Position

Assembly Member

► If filing for multiple positions, list below or on an attachment.

Agency: _____

Position: _____

2. Jurisdiction of Office (Check at least one box)

☒ State

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ Multi-County _____

☐ County of _____

☐ City of _____

☐ Other _____

3. Type of Statement (Check at least one box)

☒ **Annual:** The period covered is January 1, 2011, through December 31, 2011.

-or-

The period covered is ____/____/____, through December 31, 2011.

☐ **Leaving Office:** Date Left ____/____/____
(Check one)

☐ The period covered is January 1, 2011, through the date of leaving office.

☐ The period covered is ____/____/____, through the date of leaving office.

☐ **Assuming Office:** Date assumed ____/____/____

☐ **Candidate:** Election Year _____ Office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 3

☐ **Schedule A-1 - Investments** – schedule attached

☒ **Schedule C - Income, Loans, & Business Positions** – schedule attached

☐ **Schedule A-2 - Investments** – schedule attached

☒ **Schedule D - Income – Gifts** – schedule attached

☐ **Schedule B - Real Property** – schedule attached

☐ **Schedule E - Income – Gifts – Travel Payments** – schedule attached

-or-

☐ **None - No reportable interests on any schedule**

I have read all reasonable disclosures in preparing this statement. I have reviewed herein and in any attached schedules is true and complete. I acknowledge this

I certify under penalty of perjury under the laws of the State of California that

Date Signed 02/17/2012
(month, day, year)

Signature

SCHEDULE C
Income, Loans, & Business
Positions
(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name Nielsen

► 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary ☐ Spouse's or registered domestic partner's income

☐ Loan repayment ☐ Partnership

☐ Sale of _____
(Real property, car, boat, etc.)

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other _____
(Describe)

► 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary ☐ Spouse's or registered domestic partner's income

☐ Loan repayment ☐ Partnership

☐ Sale of _____
(Real property, car, boat, etc.)

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other _____
(Describe)

► 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

Larry Van Dyke

ADDRESS (Business Address Acceptable)

PO Box 8703, Red Bluff CA 96080

BUSINESS ACTIVITY, IF ANY, OF LENDER

Retired

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000
☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000
☒ OVER \$100,000

INTEREST RATE

6.5 % ☐ None

TERM (Months/Years)

30 years

SECURITY FOR LOAN

☐ None ☒ Personal residence

☐ Real Property _____
Street address

City

☐ Guarantor _____

☐ Other _____
(Describe)

Comments: _____

SCHEDULE D Income – Gifts

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

James W. Nielsen

► NAME OF SOURCE

AG Leadership Foundation

ADDRESS (Business Address Acceptable)

P.O. Box 479 Salinas, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 26 / 11	\$ 53.00	Reception
/ /	\$	
/ /	\$	

► NAME OF SOURCE

CRP Council for Legislative Excellence

ADDRESS (Business Address Acceptable)

2150 River Plaza, Ste. 150 Sacramento, CA 95834

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 08 / 11	\$ 75.45	Dinner
/ /	\$	
/ /	\$	

► NAME OF SOURCE

Jackson Gualco

ADDRESS (Business Address Acceptable)

770 L St. Ste. 1440, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 16 / 11	\$ 50.52	Leather Journals
/ /	\$	
/ /	\$	

► NAME OF SOURCE

NFIB

ADDRESS (Business Address Acceptable)

921 11th Street, Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 29 / 11	\$ 67.24	Reception
/ /	\$	
/ /	\$	

► NAME OF SOURCE

Yocha Dehe Wintun Nation

ADDRESS (Business Address Acceptable)

P.O. Box 18 Brooks, CA 95606

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
04 / 13 / 11	\$ 420.00	Tickets
/ /	\$	
/ /	\$	

► NAME OF SOURCE

Barona Band of Mission Indians

ADDRESS (Business Address Acceptable)

1095 Barona Rd. Lakeside, CA 92040

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
08 / 11 / 11	\$ 69.60	Dinner
/ /	\$	
/ /	\$	

Comments: _____

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PRACTICES COMMISSION
SCHEDULE D
2011-2012

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
AMENDMENT

BY: WJga

▶ NAME OF SOURCE

AG Leadership Foundation

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P.O. Box 479 Salinas, CA

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	\$	
	\$	

Filer's VerificationPrint Name James W. NielsenOffice, Agency or Court CA State Assembly

Statement Type ☐ 2011/2012 Annual ☐ Assuming ☐ Leaving
☒ 2011 Annual ☐ Candidate
 (yr)

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 03/02/12

Filer's

Comments:



Assemblyman Jim Nielsen

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MEMORANDUM

March 15, 2012

TO: CA Fair Political Practices Commission
428 J Street, Suite 620
Sacramento CA 95814

FR: Jim Nielsen, Assemblyman - District Two
State Capitol, Room 6031
Sacramento CA 95814

RE: Form 700 - Amendment, Filed March 6, 2012

Please make this information part of my 2011 public record, as I have filed an amendment to my Form 700 for 2011 correcting a reporting error in Section D.

The entity that conducted an informational seminar on February 9, 2011, which I attended as a panel speaker, has informed me that the materials associated with this informational event were not a gift and were thus reported in error on my Form 700.

See attached copy of amendment to Form 700 filed with the Assembly Chief Clerk on March 6, 2012.